1421636





J.S. SECURITIES AND EXCHANGE COMMSSION Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	□ Rule 506	X Section 4(6)	□ ULOE
BASIC IDENTIFICAT	ION DATA		
<del> </del>			
me has changed, an 	d indicate change	7	OCESSED -
ity, State, Zip Code		/ )-11	OOFOOR P
do 80524		V 1/1/	AN 0 9 2008
reet, City, State, Zip	Code)		HOMSON INANCIAL
1 1.			
he alternative ener	gy business.		
	□ othe	er (please specify):	
Month	Year		
11	2007	X Actual 🗆 Estir	nated
		eviation for State:	
			· · · · · · · · · · · · · · · · · · ·
in reliance on an ex	remption under Ri	egulation D or Sec	tion 4(6), 17 CFR 230.
	me has changed, an City, State, Zip Code) do 80524 reet. City, State, Zip he alternative ener already formed Month 11 cer two-lette: U.S. Po	city, State, Zip Code) do 80524  reet. City, State, Zip Code)  the alternative energy business.  already formed  Month  Year  11 2007	me has changed, and indicate change.)  City, State, Zip Code)  do 80524  reet, City, State, Zip Code)  the alternative energy business.  already formed  Month  Year  11  2007  X Actual © Estirer two-lette: U.S. Postal Service appreviation for State:

When To File. A notice must be filed no later than 15 days after the first sale of securities in the offening. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required. Five (5): of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required.: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be riled in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss, of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (1046)	A.	BASIC IDENTIFIC	ATION DATA	
Enter the information requested for the folio     Each promoter of the issuer, if the     Esch peneficial owner having the p	iceruse has been probatized	within the past five year direct the vote or dispos	s; sition of, 10% or	more of a class of equity securities of the
issuer, Each executive officer and director	of corporate issuers and o	f corporate general and	managing parme	ers of partnership issuers; and
Each general and managing partner  Check Box(es) that Apply:   Promoter	X Seneficial Owner	X Executive Officer	X Director	☐ General and/or Managing Parme
Full Name (Last name first, if individual) Klemsz, Brian				
Business or Residence Address (Number	and Street, City, State,	Zip Code)	-	•
	ntain, Fort Collins, Colo	rado 80524		
Check Box(es) that his aly, a promoted	X Beneficial Owner	X Executive Officer	X Director	☐ General and/or Managing Partne
Full Name (Last name first, if individual)				
Business or Residence Address (Number	and Street, City, State,	Zip Code)		
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partn
Full Name (Last name first, if individual)				
Business or Residence Address (Number	and Street, City, State.	Zip Code)		
Check Box(es) that Apply: 🖸 Promoter	☐ Beneficial Owner	☐ Executive Officer	⊡ Director	☐ General and/or Managing Partne
Full Name (Last name first, if individual)				
Business or Residence Address (Number	and Street, City, State,	Zip Code)		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	C Director	General and/or Managing Parme
Full Name (Last name first, if Individual)				
Business or Residence Address (Number	and Street, City, State,	Zip Code)		
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partne
Full Name (Last name first, if individual)		<del></del>		
Business or Residence Address (Number	and Street, City, State,	Zip Code)		
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partix
Full Name (Last name first, if individual)	<u> </u>			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. INF	ORMATIC	ON ABOL	IT OFFE	RING	······································			
1. Has the is	ssuer sold.	or does t			sell, to r	•	dited invi	estors in	this offeri	ng?		Yes X	No C
2. Does the	offering pe	rmit joint	ownershi	p of a sin	gie unit?					•		Yes X	No C
3. What is th	ne minimun	ı investm	ent that v	vill be acc	cepted fro	от алу іп	dividuai?					s <u></u> 1	V/A
eft in ! and/or wi	on or simila f a perton th a state o tiated pens	r remune to be liste or states, ons of sur	ration for ed is an a list the n ch a brok	solicitati ssociated ame of the	an of pur i person ia brokar	chasers i or agent or dealer	n connect of a broke t. if more	tion with er or deal than rive	sales of ser registe (5) perso	securities ared with ans to be	in the the SEC listed		Net applica
Business or	Residence	Address	(Number	and Stre	et, City, S	State, Zip	Code)	<del></del>	,			<del></del>	<del></del>
Name of Ass	ociated Br	oker or D	ealer	····			<del>-</del>	<u>.</u>				<u> </u>	
States in Wh	ich Person	Listed H	as Solicit	ed or Inte	ends to S	olicit Purc	anasers				<del></del>		······································
(Check "All S	States" or c	heck indi	vidual Sta	ntes)						,	· • • • • • • •		□ All S
[	(AL) [IL] MT] (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [CH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR]	[ID] [MO] [PA]
Full Name (L				11/71	11/21			1.01	(VA)	144.01	TAAII	144.11	[PR]
Business or f	Residence	Address	(Number	and Stree	et, City. Ş	State, Žip	Code)	<del></del>					·
Name of Ass	ociated Bro	ker or De	ealer	<del></del>	<del></del>		<u>-</u>					· · · · · · · · · · · · · · · · · · ·	
States in Whi	ich Person	Listea Ha	as Solicite	ed or Inte	nds to So	olicit Purc	hasers					<del></del>	·
(Check "All S	tales" or cf	neck indiv	idual Sta	tes)								· · · · · · · · ·	🗆 Alisi
	[AL] [IL] [MT] (RI]	(AK) (NE) (SC)	[AZ] [IA] [NY] [SO]	[AR] [KS] [NH]	[CA] [NJ] [NJ]	[CO] [LA] [NM] [UT]	[CT] [ME] [XS]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	(HI] [MS] [OR] [WY]	[ID] [MG] [PA] [PR]
Full Name (La	ast name fi	rst, if indi	vidual)				-						
Business or F	Residence	Address (	Number	and Stree	at, City, S	tate, ZIP	Code)			····	<del></del>		. <del>-</del>
Name of Asso	ciated Bro	ker or De	aler				<del></del>						
States in Whi	ch Person	Listed Ha	s Solicite	ed or Inter	nds to Sc	dicit Purc	hasers			<del></del>		<del></del>	<del></del> .
Check "All Si	tates" or ch	eck indiv	iduai Stat	tes)	<b></b> .	• • • • • • •			• • • • • •				□ All St
	[AL] [IL] [MT]	[AK] [NE] (SC)	[AZ] [1A] [NV] (SO)	[AR] [KS] [NH]	[X] [KX] [CA]	(CO) (LA) (NM) (UT)	(ME) (ME) (SY)	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(10) [MO] {PA] (PR)

(Use blank sheet, or copy and use additional copies of this shed, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXP	ENSES AND USE	0	F PROCEEL	S	
. Enter the aggregate offering price of securities included in this offering and the total amorphic the transaction is an exchange offering, check this box $\ \square$ and indicate in the column be	DIOS VINCATIC TOLL	-nu	er "U" it answ	eris	none" or "ze ed for exchai
nd aiready exchanged.			Aggregate/ Offering Price		
Type of Security					
Debt		\$_		\$_	·
Equity				\$_	53,125
X Common ☐ Preferred					
		c		\$	
Convertible Securities (including warrants)					
Partnership Interests					
Other (Specify)					
Total		\$_	53,125	\$	53,125
Enter the number of accredited and non-accredited investors who have purchased security and the aggregate dollar amounts of their purchases. For offerings under Rule 504, increases who have purchased securities and the aggregate dollar amount of their purchase inter "0" if answer is "none" or " zero."	dicate the unimber	OI			
Aggregate			Dollar Amous Of Purchase		
Accredited investors		\$_	50 105	<del></del> -	
		٥_	53,125	_	
Total (for filings under Rule 504 only)	61	\$_	<u>53,125</u>		
If this filing is for an offering under Rule 504 or 505, enter the information requested for the issuer, to date, in offerings of the types indicated, in the twelve (12) months priocurities in this offering. Classify securities by type listed in Part C - Question 1.	r all securities so r to the first sale	ld of	Type of Security	Doll	lar Amount Sold
Type of offering			•		6
Rule 505	*********************	•		_	\$
Regulation A					\$
regulation A				_	•
Rule 504	,.,.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Common	-	\$ <u>53,125</u>
Total				<del>.</del>	\$ <u>53,125</u>
a. Furnish a statement of all expenses in connection with the issuance and distribution s offering. Exclude amounts relating solely to organization expenses of the issuer. The ten as subject to future contingencies. If the amount of an expenditure is not known, furr eck the box to the left of the estimate.	information may t	be			
Transfer Agent's Fees					\$
Printing and Engraving Costs				□	\$
Legal Fees					\$
Accounting Fees					\$
Engineering Fees					\$
Sales Commissions (specify finders' fees separately)					\$
Other Expenses (identify) Escrow Agent fees					\$
Total					\$

Total

C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AN	ט ט	E OF PROCEE	os
b. Enter the difference between the aggregate offerin 1 and total expenses furnished in response to Part C - gross proceeds to the issuer	Question 4.a. This difference is the "a	alnen	<b>ed</b>	
5. Indicate below the amount of the adjusted gross prused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate. The	total of the payments listed must eq	hau	an	
adjusted gross proceeds to the issuer set forth in respi	onse to Part C - Quesuon 4.0 audre.		Payments to Officers Directors, & Affiliates	Payments To Others
Salaries and fees	11,555°,, 111141111115,151 1111		\$	
Purchase of real estate			s	_ 🗆 \$
Purchase, rental or leasing and installation of	machinery and equipment	₽	\$	_ 🗆 \$
Construction or leasing of plant buildings and	facilities	□	\$	_
Acquisition of other businesses (including the in this offering that may be used in exchange another issuer pursuant to a merger)	for the assets or securities of	۵	5	
Repayment of indebtedness	***************************************	ū	\$	
Working capital	***************************************		\$	D \$ 53,825
Other (specify):	14.711.74 <b>14.</b> 744		\$	
Column Totals	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	۵	\$	_ D\$
Total Payments Listed (column totals added)	,		□\$_	53. <b>‡25</b>
	D. FEDERAL SIGNATURE			
	D. FEDERAL SIGNATURE		<del></del>	<del></del>
The issuer has duly caused this notice to be signed to following signature constitutes an undertaking by the request of its staff, the information furnished by the iss	e issuer to furnish to the U.S. Securi	ies a	ind Exchange C	iommission, upon writte
Issuer (Print or Type)	Signature 7 (/	_	, Date	
WestMountain Alternative Energy, inc.				12/11/07
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Brian L. Klemsz	President			

	ATTENTION			
Intentional misstatements or omissions of f	act constitute fo	deral criminal violations. (See IS U	.S.C. 1	001.)
				<u> </u>
	. STATE SIGNATI	IRE		
<ol> <li>Is any party described in 17 CFR 230.252(c), (d), (e) or of such rule?</li> </ol>	(f) presently subje	in to any of the disqualification provisions	Yes	No X
See Append	dix, Column 5, for :	tate response.		
2. The undersigned issuer hereby undertakes to furnish to a D (17 FR239.500) at such times as required by state law.				
3. The undersigned issuer hereby undertakes to furnish to to offerees.				
4. The undersigned issuer represents that the issuer is fam Offering Exemption (ULCE) of the state in which this rexemption has the burden of establishing that these condi-	TOTICE IS HIEC BUILD	Auget # (Strict and respect comments a	othe U e avail	niform limited lability of this
The issuer has read this notification and knows the contenundersigned duly authorized person.	nts to be true and	has duly caused this notice to be signed	on its	behalf by the
Issuer (Print or Type)  WestMountain Alternative Energy, Inc.	nature	Date	12/11	/07
Name (Print or Type)	e (Print or/Type)			
Brian L. Klemsz	President			

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form O must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	to n accre invest Sta (Part B-	dited ors in ate	3 Type of security and aggregate offering price offered in state (Part C-Item)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL								ļ	
AK							 		
AZ								<u> </u>	
AR							\ <u> </u>		
CA							<u> </u>		
co	Х		Common			61	\$53,125		X
СТ	<u> </u>								
DE								<u> </u>	
DC								ļ	
FL	<u> </u>			<u></u>	ļ			ļ	
GA		ļ <del></del>						<u> </u>	
Н	ļ	<u> </u>		ļ		ļ	<u> </u>	<del>                                     </del>	<u> </u>
ID	<u> </u>			ļ				<del> </del>	
IL	<u> </u>	<u> </u>		<u> </u>		ļ. <u> </u>		<u> </u>	
IN				ļ	<u> </u>		<u> </u>	ļ	
Lk		<del> </del>		\ <u> </u>		<u> </u>		<del> </del>	
KS		<u> </u>		<del> </del>	<u> </u>			<del> </del> _	<u> </u>
KY	<u></u>	<u> </u>		<del> </del>					
LA	<u> </u>	<del>                                     </del>		<del> </del>				}	
ME	<u> </u>	ļ		<del> </del>				<u>'</u>	<u> </u>
MD	<del> </del>	<del> </del>						<del>                                     </del>	
MA	<u> </u>	<del> </del>				<del> </del>	<del> </del>	<del> </del> -	<del> </del>
Mi	<del>                                     </del>	<u> </u>		<u> </u>		<del>                                     </del>	<del> </del>	<del> </del>	
MN		-		-			-	1	
MS MO	<del> </del>	<del> </del>			<del> </del>			<del>                                     </del>	1

	Intend to non-a investors	2 I to sell ccredited s in State I Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part Item)				
State	Yes	No	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT			_					
NE								
NV				<u></u>				
NH			_				<u> </u>	
NJ								
NM								ļ <u>.</u>
NY								<u> </u>
NC								
ND								
ОН				 				<u> </u>
OK								
OR								
PA							<u> </u>	<del> </del>
RI							<u> </u>	
sc								
SD				<u> </u>				
TN							<u> </u>	
TX								
UT								
VT					<u> </u>			
VA								
WA								
WV							<b></b>	<u> </u>
WI							<u> </u>	<u> </u>
WY								<u></u>
PR							TE	-

The second secon